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Rev. 6/93U.S. Department of Commerce
Patent and Trademark Office**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**☐ Declaration Submitted
with Initial Filing ☐ Declaration Submitted after
Initial Filing

Attorney Docket Number 2727-102

First Named Inventor Cornelia Berghof

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**"Amino Acid Sequences and Method for Isolating
Bacteria from the Type Genus Pseudomonas"**

(Title of the invention)

the specification of which

☐ is attached hereto
OR☒ was filed on (MM/DD/YYYY) 09/09/1998

as United States Application Number or PCT International

Application Number PCT/EP98/05738

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
197 39 611.9	Germany (DE)	09/09/1997	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231.

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name ☐ Customer Number or label

☐ OR

☐ List attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Joseph C. Sullivan	18,720	Ronald R. Santucci	28,988
Gerald Levy	24,419	Ronald E. Brown	32,200
		John F. Gulbin	33,180
		Richard J. Danyko	33,672

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☐ Customer Number OR ☐ Fill in correspondence address below

Name: Ronald R. Santucci

Address: Pitney, Hardin, Kipp & Szuch, LLP

Address: 711 Third Avenue, 20th Floor

City: New York, State: NY ZIP: 10017

Country: U.S.A. Telephone: 212-687-6000 Fax: 212-682-3484

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Cornelia	Middle Initial		Family Name	Berghof	Suffix e.g. Jr.	
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Inventor's Signature		Date	
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Residence: City	Berlin	State		Country	Germany	Citizenship	German
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Post Office Address	Rhodelaenderweg 85,
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Post Office Address	
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City	Berlin	State		Zip	D-12355	Country	Germany	Applicant Authority	
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☒ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION						ADDITIONAL INVENTOR(S) Supplemental Sheet	
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Alexander	Middle Initial		Family Name	Gasch	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Berlin	State		Country	Germany	Citizenship German	
Post Office Address	Steegerstr. 71,						
Post Office Address							
City	Berlin	State		Zip	D-13359	Country	Germany
Applicant Authority							
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Anja	Middle Initial		Family Name	Braeuer	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Berlin	State		Country	Germany	Citizenship German	
Post Office Address	Residenzstr. 100,						
Post Office Address							
City	Berlin	State		Zip	D-13409	Country	Germany
Applicant Authority							
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Cordt	Middle Initial		Family Name	Groenewald	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Berlin	State		Country	Germany	Citizenship German	
Post Office Address	Elberfelder Str. 12,						
Post Office Address							
City	Berlin	State		Zip	D-10555	Country	Germany
Applicant Authority							
Name of Additional Joint Inventor, if any:						<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Freimut	Middle Initial		Family Name	Wilborn	Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City	Berlin	State		Country	Germany	Citizenship German	
Post Office Address	Neue Kantstr. 9,						
Post Office Address							
City	Berlin	State		Zip	D-14057	Country	Germany
Applicant Authority							

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Arndt		Middle Initial		Family Name	Rolfs		Suffix	
Inventor's Signature							Date		
Residence: City	Rostock		State		Country	Germany		Citizenship	German
Post Office Address	Schroederstr. 39,								
Post Office Address									
City	Rostock		State		Zip	D-18055		Country	Germany
									Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name			Suffix	e.g. Jr.
Inventor's Signature							Date		
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip			Country	
									Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name			Suffix	e.g. Jr.
Inventor's Signature							Date		
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip			Country	
									Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name			Suffix	e.g. Jr.
Inventor's Signature							Date		
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip			Country	
									Applicant Authority
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name			Middle Initial		Family Name			Suffix	e.g. Jr.
Inventor's Signature							Date		
Residence: City			State		Country			Citizenship	
Post Office Address									
Post Office Address									
City			State		Zip			Country	
									Applicant Authority
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									